

CLAIMS ONLY

Application Number
10506659

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14	1					
15						
16						
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27						
28	1					
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46						
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48						
49						
50						
Total						
Indep	2					
Total						
Depend	16					
Total						
Claims	18					

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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Total						
Indep						
Total						
Depend						
Total						
Claims						